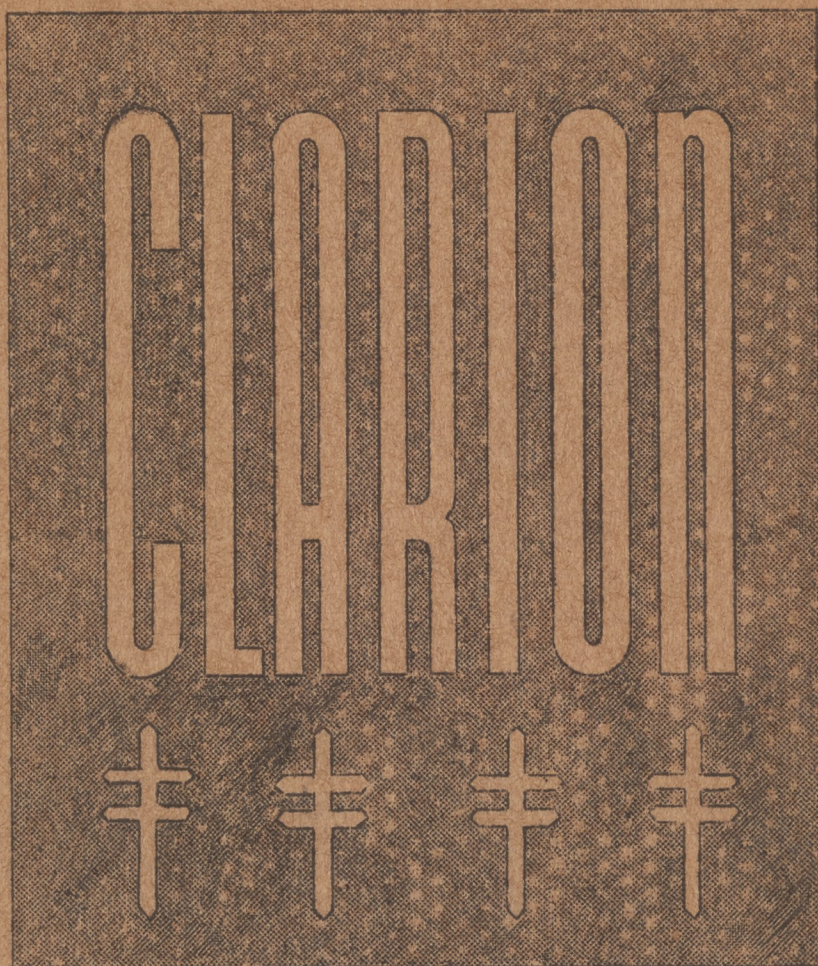
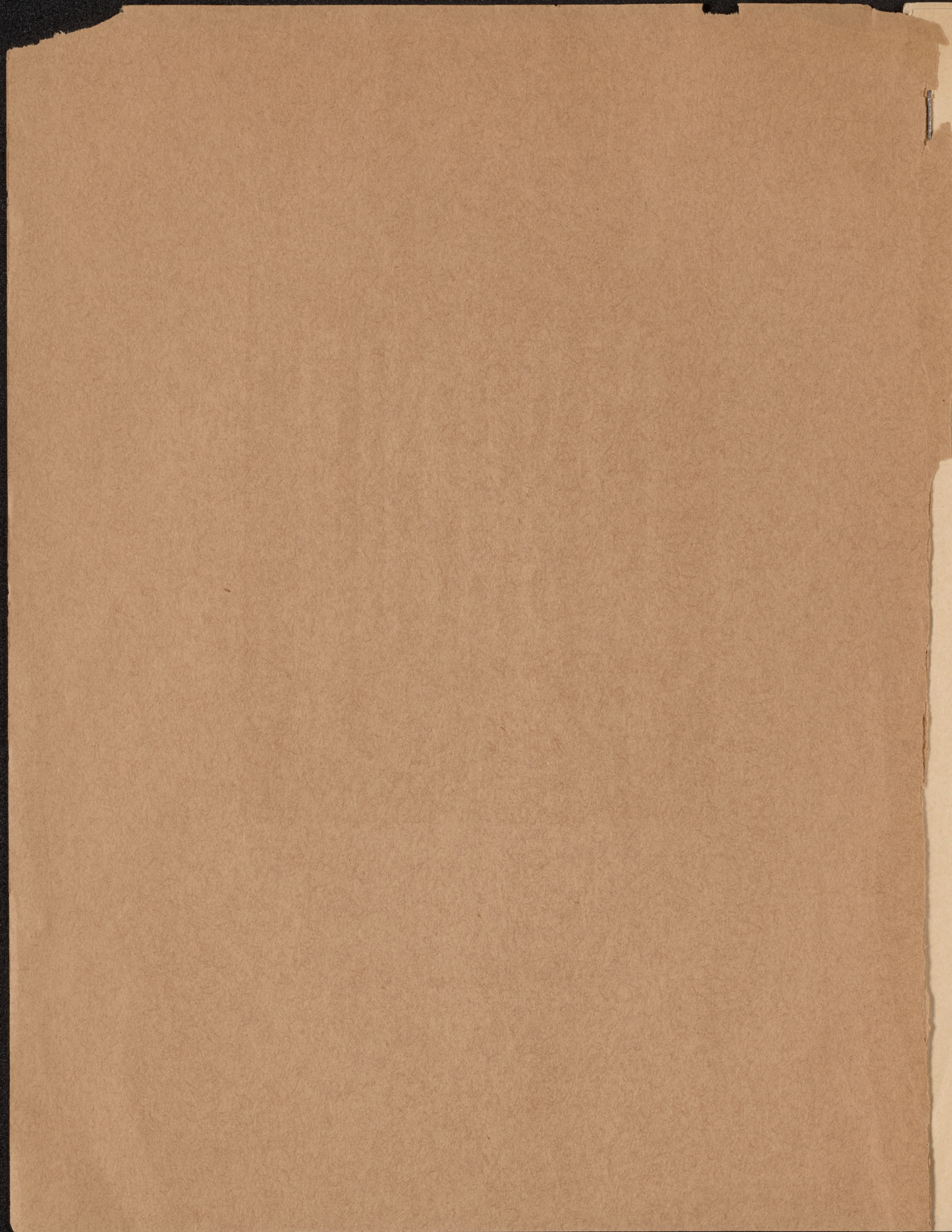


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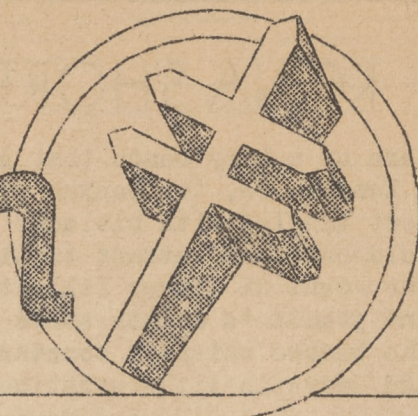


HASSLER HEALTH HOME &
TUBERCULOSIS DIVISION
SAN FRANCISCO HOSPITAL



the

Clarion



JUNE 1942

VOLUME 3

NUMBER 6

Kona Shore	Norma Johnson	2
The Symptoms of Tuberculosis	W. R. P. Clark, M.D.	3
Letters	Barney Sands	4
Tuberculosis Field Nursing	Ernestine Schwab, R.N.	5
Library Notes		7
MEDICAL INFORMATION		8
Complaisance of the Tuberculous	E. A. Schaper, M.D.	9
Screen and Airways		11
HASSLER ROUND UP		
Ward 1	June Rahm	12
Ward 2	T. T., E. K., N. J.	12
Ward 3	Barney Sands	13
Hassler Hi-Lites		14
Ward 4	W. L., & K. K.	15
Ward 5A	G. I. Fieldgude	15
Ward 5B	John Brougham	16
Ward 6A	Roy Jair	17
Adventures of Herman & Pete	James Cook	18
Shackled Lives	Spunk	20
'ROUND THE WARDS		
Ward 19	Thelma Portolos	21
Ward 31	Marion MacDonald	22
Ward 32	Elvira Jordanoff	22
Personality Pre-View		23
Ward 26	Phillip Richards	24
Ward 28	Jack Paulis	24
Help Yourself	NTA	26

THE EXISTENCE OF THE CLARION IS DEPENDENT SOLELY UPON
FINANCIAL CONTRIBUTIONS RECEIVED FROM OUR READERS

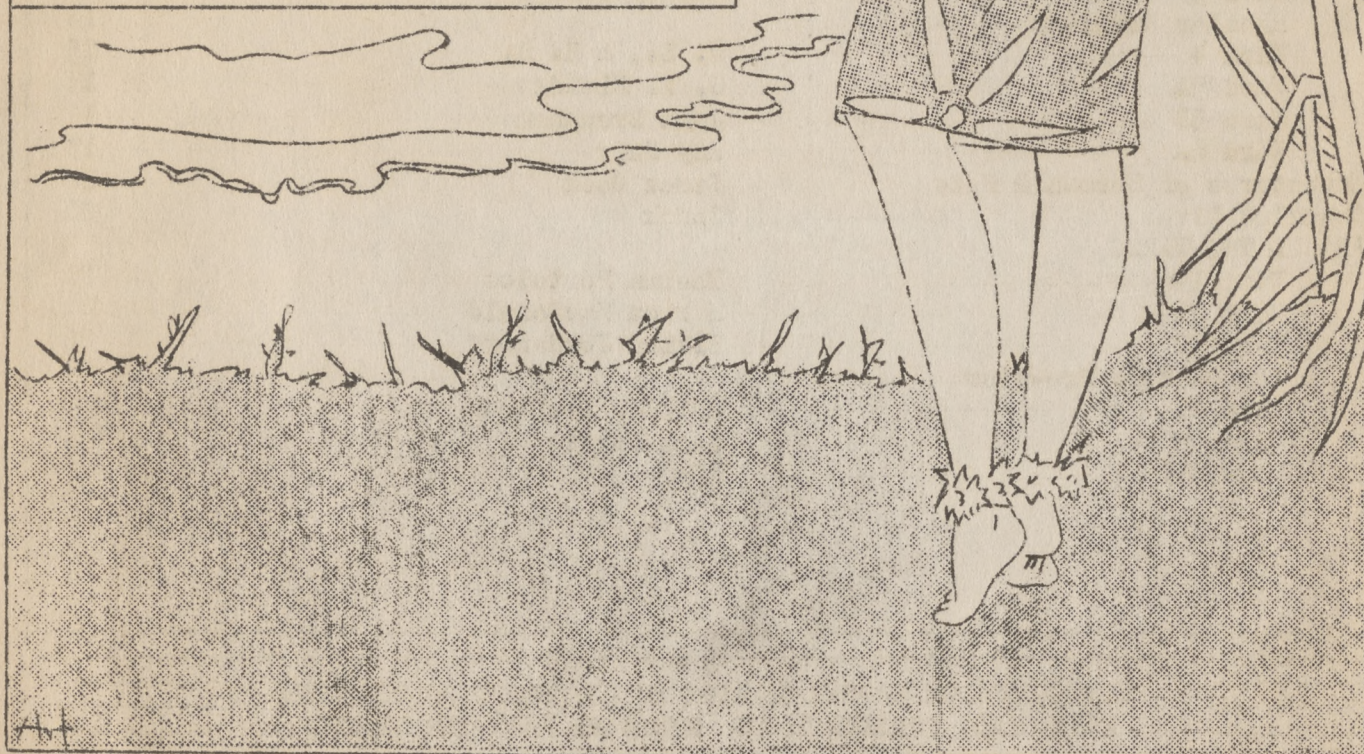
KONA SHORE

Here on a tiny beach that skirts
A Kona shore, the banyan trees -
Feet tangled with hibiscus shrub -
Hold back each errant tropic breeze.
The scent of ginger fills the air,
And jasmine's dainty stars wink white;
The bamboo whispers constantly
And sways in lithe erratic flight.

The sky is bronze and amethyst
As sunset's flaming shades depart.
My driftwood fire turns into ash
With just a glowing opal heart.
It sends aloft a few bright sparks -
Like jewels into the purple night -
And Pele's brooding figure black
Is crowned in iridescent light.

The great moon rises suddenly
And flows a path of molten gold
To spill its wealth about my feet
In yellow doubloons as of old.
A soft wind fills the air with song;
It sings a plaintive melody
That lends enchantment to the night
And holds me in a reverie.

- Norma Johnson



THE SYMPTOMS OF TUBERCULOSIS

By W. R. P. CLARK, M.D.

Before a physician makes a diagnosis of tuberculosis he carefully records the history of the patient regarding family, exposure, education, social and economic background and symptoms. He examines the patient physically. He uses laboratory tests and X-ray, and from the composite picture he arrives at his conclusions. Not from one or two symptoms. However, when certain symptoms persist your physician should be consulted in order to detect at the earliest possible moment the presence of this disease. The earlier it is diagnosed, the shorter the time of cure. It is true that at the time of the primary infection the disease may not be recognized as there are few or no clinical symptoms. I have used the word "cure" advisedly for I believe every patient suffering from pulmonary tuberculosis has a chance of complete recovery, particularly if taken in time. In the early days of my practice I was rather pessimistic regarding patients suffering from pulmonary tuberculosis for I saw only advanced cases and the facilities for treatment were poor. As years passed, however, and conditions for care improved and patients were seen earlier my ideas changed and my conclusions now are as stated above.

In these remarks I will confine myself to tuberculosis of the lungs, although some of the symptoms mentioned are present in all types of tuberculosis.

What are these symptoms? Fatigue, loss of weight, cough, expectoration, hemorrhage, fever and night sweats.

While fatigue is a common symptom one need not have tuberculosis to feel tired for some people are born tired.

Loss of weight is an early symptom and a common one and should attract attention. The present fad of women wishing to be thin and the artificial and sometimes foolish methods used to produce it often make women an easy mark for tuberculosis infection. The tendency of relying upon stimulants, some of which may be habit forming, instead of good nourishing food, sometimes brings this about and puts the body into a receptive condition for acquiring tuberculosis. Therefore, loss of weight is a signal to be watched.

Cough is an almost constant symptom. Patients themselves, are, at first, frequently not conscious of their cough. Members of the family or intimate associates will oftentimes notice it first. I have often asked a patient if he had a cough and have received a negative answer from him only to have one of his family or friends say, "Of course, he has had a cough for a long time." A slight cough in the early stages of tuberculosis is sometimes referred to by the patient as a "cigarette cough" It is true that smoke and other irritants, such as some of the occupational dusts or gases taken into the respiratory tract, do inflame the mucous membranes and produce cough. This slight cough is usually followed in a few weeks with expectoration. The expectoration varies with the amount of involvement in the lung tissue and the size of cavity formation. There may be thrown off in the sputum daily as many as seven billion bacilli, which emphasizes the necessity for patients taking every precaution to prevent transferring these bacilli to others. People with ordinary colds should also prevent coughing or sneezing on others. How often have I, with a bald head, felt the spray from the cough or sneeze of someone sitting back of me in a public gathering. To say the least, it is not pleasant and if that spray contains thousands of tubercle bacilli, influenza bacilli, other organisms or viruses, think

of the danger. Cough is also present in other diseases of the bronchial tubes and lungs such as non-tuberculous bronchitis, bronchiectasis, cancer of the lungs, etc., but chronic cough should not be taken lightly. Its cause should be thoroughly investigated.

The expectoration of blood, either in very small quantities or a profuse hemorrhage is often a cardinal symptom. A hemorrhage may be the first sign in early cases that attracts the patient's attention to the fact that he has tuberculosis and while this symptom, too, is present in other diseases or conditions it is the duty of the physician, when a patient gives this history, to make certain whether or not tuberculosis is the cause. While hemorrhage is disconcerting and often causes the patient and family to become panicky, it is rarely fatal in tuberculous patients, except in advanced cases. In the thousands of patients I have seen, the number of deaths from hemorrhage has been small.

Fever is one of the first, or perhaps the first, symptom of active tuberculosis and in all probability is due to the absorption of poisons produced by the tubercle bacillus, which may be modified by mixed infections. It does not run a characteristic course as in some of the other diseases, but is present in nearly all cases of active tuberculosis. The temperature at first should be taken every two hours. In early cases there is frequently a slight rise of temperature in the afternoon; sometimes this is reversed and it is present only in the morning.

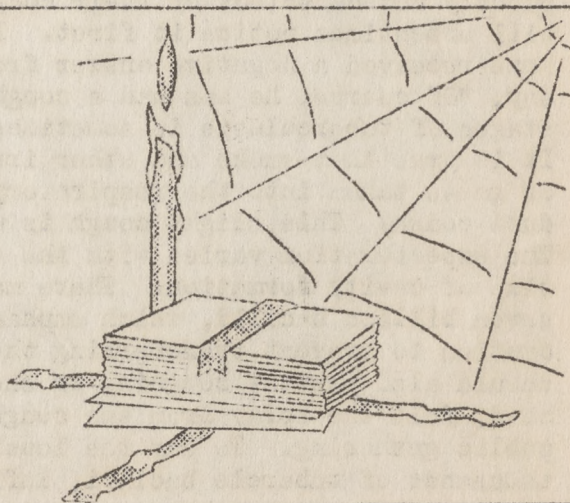
Profuse night sweats are often an early manifestation of tuberculosis and occur most commonly in the early morning hours. Sometimes the disease runs its course without any or very slight night sweats. At times the patient misunderstands you when you ask if he has had night sweats, and you receive such answers as: I have had night sweats when there were some hot steam pipes under my bed or, during hot weather, with too many covers on the bed. One does not need tuberculosis to sweat under these conditions.

Other not uncommon symptoms are indigestion or, as some patients state, stomach trouble. When working in a general medical clinic I saw a number of patients complaining of stomach trouble who later proved to be suffering from tuberculosis. There are, at times, symptoms referable to the heart, pains in the chest and changes in the fingers and in the nails. As the disease progresses and other organs are involved many other symptoms develop.

I have tried in a few words to give the most important and common symptoms but again I want to caution the reader that he may have one or two of these symptoms without necessarily having tuberculosis, but he should consult his physician.

A bundle of letters yellow with age
Had much to tell. On each fragile page
(Once penned 'neath candle's gleam)
Was scrolled a tale; a broken dream
Was written there. And once again
The long forgotten pages shared the pain
Of someone who had loved and loved in vain.

-- Barney Sands



TUBERCULOSIS

FIELD NURSING

BY ERNESTINE SCHWAB, R.N.

Late nineteenth century doctors and philanthropists, a popular word of the time, united in planning an all-out attack on an old enemy of mankind - the disease tuberculosis. From the beginning of community-wide campaigns against this old enemy, the nurse has played her part.

Today in San Francisco our Health Department has a corps of 90 public health nurses organized into its Bureau of Field Nursing, working under the direction of the City Health Officer, Doctor J. C. Geiger. These 90 nurses are engaged in a well-rounded day-by-day, year-in-year-out program of health conservation for all of the people living in San Francisco. The work is not spectacular; preventing illness and needless deaths from disease on a routine program is not showy but its results are truly brilliant when we really study tuberculosis statistics and see the continually falling death-rate from this disease.

To most of us statistics are dull and when, for example, our infant mortality rate reaches an all-time low it causes jubilation only in the hearts of a few child hygiene experts and, of course, makes our Chief, Doctor Geiger, a very proud and happy man. The City's 90 public health nurses work as far as possible with the family as a unit and this is, of course, of great importance in fighting tuberculosis which often spreads through family contact.

The field nursing program includes school nursing, infant and maternity hygiene, communicable diseases, venereal disease and tuberculosis control. In each of these divisions the field nurse works closely with doctors, clinics, teachers, social workers, health centers and relief agencies. Particularly do we find this close collaboration in the field of tuberculosis nursing because when tuberculosis hits a family it is always of long duration and the problems resulting are not only medical but social, economic and mental as well.

Though all of the City's 90 public health nurses are identified with the tuberculosis control program in the schools, baby centers or health centers, 10 of them are specialists devoting all their professional energies to the prevention of the disease tuberculosis.

In one of the many scientifically accurate and intensely interesting publications of the National Tuberculosis Association we read that in 1898 when Sir William Osler, one of the greatest physicians of all time, was Professor of Medicine at Johns Hopkins University he put two young women medical students to work in the city of Baltimore to follow up cases of tuberculosis in patients' homes and see that the physician's instructions were being carried out and that other members of the family were being protected. This is really what the public health nurse in tuberculosis does today. Soon after, in 1903, tuberculosis nurses began to work in the city of New York. From this beginning the use of the trained nurse as an important and in fact essential part of the tuberculosis control program rapidly developed throughout the country. Five years after the first nurses were engaged in tuberculosis work in New York City, the San Francisco Tuberculosis Association, then in its infancy, employed two nurses for follow-up work in the patients' homes. This was in 1908. A year later the association established its first clinics and from then on an increasing number of nurses were sent to care for the tuberculous in their homes; to teach prevention and to find new cases and bring them under care.

The work grew, not rapidly, but in importance until in 1921 there were seven nurses employed by the San Francisco Tuberculosis Association for field work. It was in this year that the City government recognized the community's responsibility and appropriated funds for the taking over of these tuberculosis nurses under official auspices. Since 1921 tuberculosis nursing in San Francisco has been a regular part of the Health Department services. The 40 public health nurses assigned to school nursing assist the Health Department physicians in an intensive tuberculin-testing program in the City's schools. This program, chiefly for children in their teens, is designed to find the early case of tuberculosis in an age group particularly vulnerable to beginning tuberculosis. Tens of thousands of San Francisco school children have received the benefits of this program - a few active serious cases have been found - many have been restored to health and many more have been given the medical advice necessary to keep them from developing tuberculosis. Each year in the school program we find the percentage of positive tuberculin reactors less.

The well-defined objectives of the field nurse in tuberculosis are: first, the patient; to find him, to secure proper medical care for him and to help him towards recovery and his reestablishment in the life of the community; second, his family; to help the patient's family make such adjustments as are needed while the patient is getting better and to protect and maintain the family's health; and third, the community; to reduce tuberculosis amongst us and in fact to eventually eliminate this scourge entirely.

In tuberculosis work we have many forces working to conquer the disease. In fighting tuberculosis, not only the medical but the social and economic resources of the community are important. Good living standards, education, and community sanitation all contribute in lowering tuberculosis rates. But before the complete social machinery can operate to aid a patient we must find him and find him early in his sickness. But even though we know the importance of finding tuberculosis patients early it is still not an easy thing to do.

Tuberculosis sneaks up on us silently. It is far different than, let us say, measles which announces itself with a rash you cannot miss, or appendicitis which comes with a severe pain in the belly to let us know trouble has started. Not so with tuberculosis. It comes silently with no announcement and may exist for a long time, even years, before its victim suspects that he is ill. If the case is found before symptoms appear treatment is easier, shorter and more certain of final success. Time, money, suffering and lives are saved. We therefore make great effort to find the case early. In finding early tuberculosis the nurse encounters many difficulties. Often people with beginning tuberculosis feel perfectly well, they look well and they consider it absurd that the nurse should ask them to go to a chest clinic or their own physician for a special chest examination including X-ray.

It is the object of the tuberculosis field nurse to persuade those who have been exposed to tuberculosis at home or at work to have a thorough examination by a competent physician. The work of the public health nurse in case finding is by no means a general shotgun prescription asking every one to have a chest examination.

It is known that there are certain population groups in which the largest percentage of tuberculosis cases are found. We know that many infants die of tuberculosis because of their closeness to unrecognized cases, perhaps of a chronic nature, in their immediate family. Childhood, on the other hand, is relatively free from tuberculosis. In the teen age we see it beginning to be of importance and tuberculosis is the leading cause of death among women between the ages of 20 and 30. It is surprising to learn that it is also the leading cause of death of men between the ages of 30 and 40 - the prime of life.

To many people tuberculosis is thought of as a disease of the young and they would never suspect that certain so-called natural infirmities of old age are nothing

more or less than tuberculosis. Hundreds of old people who think they suffer from asthma, bronchitis, heart disease, chronic indigestion, really have tuberculosis unknown to themselves and their family. It is wise to have them checked by a physician and to rule out this danger to the family. They may unwittingly spread infection.

It is known that tuberculosis is far more prevalent among the poor than the well-to-do. If we study tuberculosis statistics we find that certain racial elements of our population have much higher tuberculosis rates than others. The American Negro, who constitutes one-tenth of our United States population, accounts for one-fourth of all tuberculosis deaths. The Mexicans living in California also have a much higher incidence of tuberculosis than the general population. In San Francisco our figures show that tuberculosis among our Chinese citizens is about three times that of the rest of us. And so the tuberculosis nurse with the aid of the statistician can point her efforts to the spots in our society where she is most needed.

Results of San Francisco's 30-year-old campaign against this ever present and sneaking enemy are encouraging. In 1910, San Francisco's death rate from pulmonary tuberculosis was 180 per 100,000 population. In 1940 it was 57. The reduction of the tuberculosis death-rate, 68 per cent in thirty years, is very encouraging, but it is not enough. With war's ordeals threatening us we must maintain and strengthen our efforts against tuberculosis. San Francisco's public health nurses are soldiers in the front line in this long drawn out and silent battle against man's ancient but still-killing enemy - tuberculosis.

LIBRARY NOTES

Some of our most popular books are Warwick Deeping's "Smith"; Emile Zola's "Nana"; Bromfield's "Good Woman"; and Dale Carnegie's "Five Minute Biographies". For a rare literary treat try reading Irving Stone's "Lust for Life". This novel is based on the turbulent life of Vincent Van Gogh, a late nineteenth-century painter, and is a remarkable biography. Another writer we would like to recommend is Caldwell Taylor. He writes in a strong, sure manner that holds one's interest at all times. Our library has Caldwell's "Eagles Gather".

We have recently been given a complete set of books by Paul Hutchins. He is a young evangelist who providentially turned to the writing of Christian fiction while he lay abed in a sanatorium recovering from tuberculosis. The thirteen full length novels and five children's books, so far published, have been such a blessing to thousands that Paul Hutchins can truly say, "I am glad I had tuberculosis". These books have been placed in every tuberculosis hospital in the United States through the courtesy of the LeTowneau Evangelistic Center. We are deeply appreciative and grateful for these books.

The library itself has recently been rearranged and placed under a file card system. All badly damaged and obsolete books have been discarded, and a great many new books of the best and most recent authors have been added. Thora Twede, who is our librarian, will be glad to help you with your selection.

We mustn't forget to thank Ted Smith for his ingenuity in building such a very practical and neat looking book cart. It makes for more efficient handling and much quicker and widespread distribution of the books. It brings the library to the bedside. Al Sommers, who is in charge of the book cart, will be glad to bring any type of literature you might wish. You have only to ask.

We regret losing Mrs. Julian, who has always worked so diligently to perfect our library. Her good influence will not be forgotten, and we wish her well in whatever project she undertakes.

?? Medical ??

Information

- Q.- If adhesions cause the pleural wall to stick, say in a pneumothorax, why doesn't the infection impregnate both pleurae and infect the rib cage, causing an abscess on the surface of the skin?
- A.- Occasionally a rib is infected giving a tuberculosis of the bone. But as a rule, the infection is confined to the pleura and rarely extends from there to the other tissues. Perhaps it is because the muscle tissue which lies adjacent to the pleura of the chest wall is not very susceptible to tuberculosis.
- Q.- Why isn't the tubercle bacillus, in its course from the cavity to the bronchial tubes, absorbed by the lung cells into the blood stream thus infecting other parts of the body?
- A.- Because the bronchial tubes are lined with a special membrane which keeps the lung cells proper from coming in contact with anything in the tubes. Therefore, infection cannot get into the blood stream directly from the bronchial tubes.
- Q.- If a person with an open cut picks up a few tubercle bacilli on the lesion and it goes untreated, will it spread if a person's blood or system is weak?
- A.- Such infection usually remains local and results in a skin tuberculosis. I can see, however, that under certain conditions tubercle bacilli might enter the blood stream in the manner suggested.
- Q.- In tuberculosis of the eye does the eyeball become infected, or the membrane around the eye? If it is the membrane, do the tears secreted from the eye act as an antiseptic?
- A.- The eyeball does not become infected but only the outer membrane. Tears have no antiseptic properties, they merely cleanse the eye and keep it moist.
- Q.- In an X-ray of a tuberculous lung what do the white spots represent? Are they millions of tubercle bacilli or are they the pus secreted by them?
- A.- What are actually seen are the shadows caused by the inflammation produced by the tubercle bacillus. This shadow consists of white blood cells, known as leucocytes, fluid and broken down lung tissue.
- Q.- When the heart is pulled over to the side, in the case of adhesions, has it any effect on the heart's function? Does the position of the heart stay fixed after the lung has healed?
- A.- Displacement of the heart often produces a restriction of the circulation which sometimes results in a shortness of breath, swelling of the feet and the usual signs of heart failure. The position of the heart usually remains fixed unless it is changed by a thoracoplasty or from other kinds of compression therapy.

(Answers by E. A. Schaper, M.D., Chief, Division of Tuberculosis Control)

COMPLAISANCE OF THE TUBERCULOUS

By E. A. SCHAPER, M.D.

In the April issue of The CLARION I discussed war and tuberculosis. I cannot refrain from thinking of certain analogies which have special reference to the patient afflicted with tuberculosis when I think of some of the things which have occurred in the world during the past few months.

We see, in the daily press, references to the complaisance of the citizens of Singapore, Hongkong, and Malaya. Although a serious menace threatened them they were not greatly concerned; they went about their daily occupations as usual and made few real preparations for meeting and repulsing the invading Japanese. In Singapore they did not begin to build air raid shelters until five days before the Japanese took over the city. They resented the suggestion that a tax of 10 per cent placed on their incomes for the purpose of strengthening their defenses. They did not seem to realize, until it was too late, that something very serious was about to take place.

Likewise, the average patient having tuberculosis is often a complaisant individual. He attempts to deny the facts in the case; refuses to believe that anything very serious is wrong with him; he does not even want to hear about tuberculosis; he dislikes being instructed concerning the fundamental processes involved in curing this disease; he simply wants to be let alone. He wants to do as many as possible of the things he has always done. Even if he admits that he has tuberculosis, he still wants to put as little as possible into making a recovery. Not only that, but if he happens to be in an institution, he does all he possibly can to prevent those who are trying to get well from doing so. He knows what the rules and regulations are, but he seems to think that it is an evidence of super-intelligence to fail to observe them; he does not want to rest, himself, and makes so much noise that he keeps everybody in his neighborhood from getting any rest.

It is not uncommon for a patient to take his case into his own hands and decide to leave the sanatorium. He signs a release and leaves the institution against the doctor's advice. Needless to say that most of such patients return sooner or later much worse than they were when they left. That reminds me of the parable which tells about the man who was "possessed of the devil". The devil was cast out but returned later, bringing with him seven other devils and "the state of that man was worse than it was before". This patient fails to realize that the tubercle bacillus, working quietly and unobtrusively in his chest, goes on with its work whether the patient likes it or not. We know also that tuberculosis is a disease characterized by frequent relapses even when the patient follows the doctor's advice to the letter. This is all the more reason for taking the disease seriously.

The reasons most commonly given for leaving the Hassler Health Home against the doctor's advice are the following:

- (1) Because their relatives live in San Francisco and are unable to visit them often enough.
- (2) Restlessness from being in the sanatorium for a long time.
- (3) Family conditions which make it seem necessary to leave the sanatorium in order to aid in the support of the family.
- (4) Since it is not permissible to bring alcohol in, those with an uncontrollable thirst can only quench it by leaving the institution.

- (5) Some are intrigued by the climate mirage and go out of the state to live with relatives who have sent for them.

The really serious minded patient who is determined to get well will lend no ear to such reasoning. He will continue to follow religiously the fundamental principles governing the cure of this disease. The most important of these principles is to find a good doctor and follow his advice, absolutely.

The recalcitrant patient will not do this. He will often sign a release or if he remains in the sanatorium he puts as little effort as possible into regaining his health.

In the May, 1942, issue of the "Bulletin of the National Tuberculosis Association" there is an article by Emil Frankel entitled, "Against Doctor's Advice" in which he states:

"More than 34 per cent of the 1600 patients leaving 14 state and county sanatoria in New Jersey during the six-month period ending December 31, 1941, left against physicians' advice.

"In two sanatoria fewer than 10 per cent of the patients that left did so without the physician's consent. In three sanatoria, more than 50 per cent of the discharges were without consent, including one sanatorium where the proportion was almost 70 per cent".

During 1941, 15 per cent of the patients who left the Hassler Health Home signed a release. Compared with the New Jersey experience our patients seem to be only one-half as refractory as those in New Jersey. I know one California sanatorium where 50 per cent of the patients signed releases last year. Of course the percentage will vary somewhat with each sanatorium depending upon the type of patient admitted; the conditions existing in the sanatorium and the kind and amount of education given the patient.

I believe that everything else being equal the better the understanding the patient has of tuberculosis and the problems with which he is to deal, the less indifferent he will be and the better his chance is of ultimately making a recovery. Nevertheless, in spite of all our efforts to educate the patient and to acquaint him with the nature of his problem, about 75 per cent of the patients in the average sanatorium fail to a greater or lesser extent to live in harmony with all the principles involved in taking a cure. They fail to rest properly - when they do rest - and do not keep up the good work long enough. They do the things they like to do and leave undone the things which seem unpleasant to them. They fail to go all the way and do not observe all the rules of the game.

On the other hand, there is a comparatively small group of patients who are of the General MacArthur type; they count the cost thoroughly and make all adequate preparations for taking the cure properly; they have a great deal of common sense, which is absolutely necessary if one expects to recover from such an insidious, prolonged disease as pulmonary tuberculosis.

Because the average patient has very little realization of what he actually has to deal with in recovering from tuberculosis and because he fails to put into the job what is necessary, he frequently runs along as a more or less borderline case indefinitely. Because of these failures I have come to the conclusion that the patient with tuberculosis is of secondary consideration so far as the control of this disease is concerned. The important thing about the patient is to isolate him and keep him from infecting healthy people. Actually the big thing in the control of tuberculosis is not the patient who has it, but the person who does not. In other words, it is more important to prevent tuberculosis than to cure it. Apparently, the average pa-

tient does not really care whether he gets well or not. He goes through the motions of taking the cure, but that is about as far as it goes. He succeeds only in fooling himself.

In conclusion, then, let me again emphasize the importance of learning from the mistakes of others. Let us not become so engrossed in the affairs of the immediate present that we forget to look into the future. Let us realize that by neglecting to prepare to prevent the spread of tuberculosis in times like these, we only create a serious problem which we shall have to meet later on, when it will be so much more difficult to solve. By the proper expenditure of a few thousand dollars now we can save millions of dollars later.

The patient having tuberculosis also can learn many lessons from what is going on in the world at the present time, if he is wise enough to interpret current events and make a practical application to himself. In order to do this, however, all those having the "Singapore" type of mind will have to change it for one resembling that of MacArthur.

Hobart Bosworth was supposed to die in the early 1900's. The doctors told him so; said he had tuberculosis and there was no hope. At that time he was at the top in the legitimate theatre. So Mr. Bosworth went to Arizona to spend his last days. At 74 he was hale and hearty, and the veteran of 551 moving pictures. In 1909, after curing for seven years, he starred in the first picture ever made in Los Angeles, a one-reeler called "The Sultan's Power". It was filmed in what had been a Chinese laundry and was finished in two days. He had survived the doctors who gave him up. He hadn't believed all that was told him!

--- NTA

The Screen and Airways

June 17, 1942	The Bride Came C.O.D.	(Davis - Cagney)
June 24, 1942	Ringside Maisie	(Sothorn - Murphy)
July 1, 1942	Northwest Passage	(Tracey - Young)
July 8, 1942	Kiss the Boys Goodbye	(Mary Martin)
July 15, 1942	Citizen Kane	(Orsen Wells)

over k s a n

6:15 to 6:45 p.m.

June 13, 1942	Housing and Its Relation to the Tuberculosis Problem	Homer Thyle
June 20, 1942	The Patient's Viewpoint Concerning the Tuberculosis Problem	Harvey Hansen
June 27, 1942	The Effect of the World War Upon the Tuberculosis Problem	Robert A. Peers, M.D.



Hassler Round-up

Ward 1

Your reporter is now situated snugly beneath the covers pretending to be taking refuge from the weather, but actually trying to get the information down on paper without being too conspicuous about the whole matter. For instance, Gertrude Wulff just asked me point blank what I happen to be writing. Her tone implied suspicion, but her expression this morning is pixie-like, and that's so decidedly different from the look she cast in this direction the day last month's CLARION came out.

Helen Jordan has threatened me. Also Jeanette Hong, who's on voice rest, put a note in my bed to convey her reaction to what she calls her publicity. Katherine Lopez is the only non-committal one in the room, but judging from her expression she is thinking of Virginia Fitzpatrick's famous words, "Let's be calm".

That Edith Berger gal has moved again .. this time back to the San Francisco Hospital, and how we all miss her. We wish her the very best of luck and hope to hear from her regularly in the future.

Daisy May Jackson now "dines out every evening" and is seen strolling along the route to the dining room with newcomer Emily Fidiam. Even "Bobbie" Menicucci goes, in spite of the fact that she doesn't quite know how she makes it - and she wonders if it's all due to a new school of thought or just what. Jennie Jeong, Lorraine Aguirre and Bo Kum Lee are also being seen in the dining room again. Hurrah for all of them! We find Amelia Baltazar still on trays. Hurry up, Amelia.

One of the new additions to Ward I is little Pat Hurley who, since her arrival, celebrated her thirteenth birthday. And if you are word conscious you can say she has the cutest little retrousse nose you ever saw, can't you?

-- June Rahm

Ward 2

Since the only way to protect yourself is to write the ward news - and also the only way to be sure that your name is mentioned - we, the undersigned - Thora Twede, Evelyn Kretzmer and Norma Johnson - have taken the situation in hand. It is only fair to state that under these circumstances any resemblance to the truth found herein is strictly coincidental.

The "Twelve Sixty Club" of Ward II has only one entrance requirement - that you bring one record with two playable sides. Consequently, I think it is very unfair of the members to bar me just because the only record I own has "Silent Night" on one side and "Adeste Fidelis" on the other. I may have to wait until Christmas, but I'll get even. The rhythm of these sessions is of such a low order that Cab Calloway's swing is considered culture. Yes, "And the Angels Sing", but not for Norma.

Things we want to know are: Why does Lilly Yim use a mirror when she puts on cold cream in the dark?...If Maree Mathewson is getting her waffles?....Why Gloria Gonzales is so absent minded?....Why Thora never feels sleepy?....Why not pale pills for pink cloud people?....How come Evelyn Kretzmer has so much trouble breaking her Swan soap up into little bars? It sounds easy on the radio.

Is Clare Fennell the model patient or the patient model?....Have you noticed that Stella Yee looks like Susie Q now that she braids her hair? Stella is a most conscientious scholastic coach; she, Lilly, and Angelina Martinez are battling their way in the "A" class.

New patients whom we want to welcome this month are: Sue Mock, Rose Chan, Li Que Shee, Janette Stanifer, and Dee Winward who has joined us from Ward I. Incidentally, Dee still plays good pinochle and bridge. Oh, for a fourth! Doesn't anyone play bridge anymore?

Ann Borjas has moved into Sophie Kaplanis's recently vacated bed. It is rumored that is a lucky corner; so don't let us down, Ann.

Thora can take her strawberry tarts or leave them alone (she says), but she still has our arm from the last time we took her literally. Speaking of food (and we usually are) did you ever try to hide a large box of smoked fish where it wouldn't be smelled out? Or is it vice versa? These are a particularly potent variety that literally bite back if not eaten within a day or two. No wonder we are so strong!

Snappy come back of the month on Ward II is - "Oh, yeah!"

- T. T., E. K., N. J.

Ward 3

Ward II has nothing on us; we have a snappy saying on Ward III, too. "So's your old man." How's that for unadulterated sophistry? And so, girls, if you want to keep up with the master minds of our ward, you better have something pretty hot on tap for next month.

And speaking of hot stuff reminds me that it is a very hot day. After we get through with this amamuensing racket we shall go in for an hour or two of serene and quiet collapsation. Here is hoping that none of these wise guys come along, shake our bed and say, "Wake up Sands, a half hour more to sleep".

We see the first light of dawn, these fine mornings, to the tune of what seems millions of birds outside our window. And this again reminds us (we are always being reminded of something), that a certain quaint young lad by the name of Pod-something-or-other was heard to say: "Isn't it lovely to see the birds picking each others teeth?" We have heard about bird's teeth before, but this is the first time we knew they actually went in for extended molar cleaning. These pundits of learning certainly know things, don't they?

Extra: Grahame crashes Dr. Schaper's radio program. It seems that said crash was in reference to a pillow and the cinema. How the old recluse ever made the air waves is a mystery to us, but it must be true 'cause we heard it with our own ears.

Our ward houses nothing but men - yeh, and not all of them are of the animated variety. Leon Lym has fashioned a full set of "chess men", and they are beauties to behold....George Lee, another he-man, goes in for the manufacture of airplanes. (Boy, that's not news, though; that's trite). One of this lad's good points is swimming - and how that boy can swim! - but 'nough said on that score....We have often heard of "Mice and Men", but we have an oldie about "Pigs and Men". Said pigs being of the guinea variety. The keeper of the pigs is George Wong, a chap that really knows

HASSLER HI-LITES

WARD 4

TODDI'S GARDEN



WARD 2

LOW CULTURE?

1260 CLUB



WARD 5B

HOROSCOPE!



WARD 5A

"BLUE-EYES" FITZGERALD

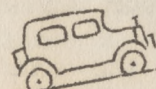


LUCKY AT CARDS

WARD 1

DINING

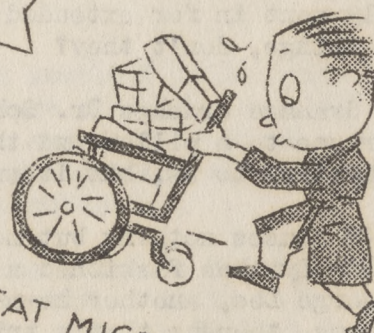
OUT!



DAISY MAE JACKSON

WARD 6A

WARD 5B



THE GREAT MIGRATION

what it's all about....We don't know just what to write about our good friend Wing Wong Moon, for he doesn't seem to do much of anything. Yet, withal, he seems to keep busy doing just that.

Mr. Van Gorder, the bookkeeper next door, just walked in and he looks "Oh so cool". It's a funny thing, but a lot of folks I see this morning look so cool and so comfortable. How do they do it? Sorry folks, we are just about wilted. Will quit now with hopes that a snow storm is brewing in the offing.

- Barney Sands

Ward 4

First of all, I should mention the lead man of our ward, Herb Picetti. He is a very studious fellow and takes his lessons seriously....Frank Mullen has now retired from his work in the store (Sunshine Corner) and now enjoys the sunshine while hiking in the great out-of-doors....Walker Weddington moved into Room D. He started to make an afghan (a kind of blanket or wrap). After he made one block, someone else finished it.

Just rec'd news of Goodman's oranges. After trying to solve the case for the past two months, our private detective, Charles Gerchen, found out what it's all about. However, we are not allowed to make a report yet. Good work, C. G.!!

Lee Lay is a very polite gentleman. Even while talking in his sleep he says, "Excuse me". He recently rec'd some very beautiful roses, but the source of said flowers remains a secret. Could he be somebody's pet? - or could his laundry work for Moon Lee have anything to do with it?

Toddi's garden is getting a lot of fine attention. Our wonder is where are the lovely bouquets going?....Senor Gonzales, where are you going with broom and dust pan on Saturday mornings? It seems that a lot of the boys are anxious to have his job....Lately, we often see Dr. Rubin strolling on the porch. Did you ever see his hair cut?

Bob Edwards is now in a private room in 5B. His mumps turned out to be a toothache. After Bob finished painting the library cart, Frank Lenci wanted to use it for peddling his wares - but the librarian rebelled....Al Gillette and Leonard Woodward came down from Ward 5B. They are apparently very pleased with the change....Harry Lowe is also a newcomer and chats with our Chinese poet Ong Mee, and philosopher Lew Jim Lee.

Ed Nesbitt has been reading about "Gramicidin" (Magic Mud) in Colliers. Now he has high hopes for future cures....Reno Dal Balcon, a quiet person, now more quiet than ever. He goes to bed early and gets up late, and why?

Extra: Matthew Mulroy is now working in the dining room - very efficient and all that sort of thing....Frank Lenci, the sample of slow motion, is not the manager of Sunshine Corner.

- W. L. & K. K.

Ward 5A

According to a news report, there is a tremendous program for the training of thousands of nurses for the armed forces. Among the qualifications listed by the nurses' association was the ability to wisecrack. Frankly, it nearly floored us. Imagine our tuberculin nurse greeting the pharmacist with a pert, "Shoot the bug juice to me, John boy!" Or comes temp-taking time and a remark something like this, "Slip it in your lip, drip!" We couldn't help but feel pity for our soldier boys, as we read it. Their life is tough enough as it is.

Friends of Bill Evans should reach him at the same address at least until September 9, 1942. On that date "How Green Was My Valley" comes to the Hassler Theater and his heart is set on seeing it. He's read the book, but far more than that he has lived the story. You see, as a youth Bill worked in the coal mines of Wales,

If there's any truth in the old saw about being lucky at cards, unlucky in love, Johnny "Blue-eyes" Fitzgerald's love-life must be a flat tire. Some moniker that "Blue Eyes", isn't it? Blue-eyes continues to draw fours-of-a-kind and full houses with monotonous regularity; now draws smoke from tailor-mades instead of from Bull Durhams.

John "Tennessee" Timmons says it's gospel truth he's a-gonna tend to square-knot belt-makin' and no more horsin' around. Heavenly days! no more cacti in beds, no more short-sheets, no more stacked decks of cards! It sounds too good and besides there's the story of the leopard and his spots.

"Butch" Sommers has inherited Ernie Barkman's garden and all the headaches that go with it - insects, rodents, birds and arrogaters (no, I don't mean alligators).... Ubiquitous "Frenchy" Chabot, cigar in mouth, continues to make the rounds on his mission to make Hassler baseball-minded. Now, Frenchy never could claim to be blessed with a stylish figure. But lately he's taking pneumoperitoneum and as far as his bay window is concerned ceilings, rations and restrictions are meaningless words.

Art Mitchell says now he has seen everything. In one particularly hectic pedro game, his opponent bid ten with only the ace, drew a mitt-full of trumps and made it.Prince "Lucky" Johnson recently won the baseball pool three times. "It seems like predestination," says he philosophically....Saddest story of the month: Big Leo Baker's polliwogs, which he insisted on calling "my baby goldfishes", were returned to their habitat. His unsympathetic pals flatly refused to share their bathtub with juvenile batrachians, even if they were well-behaved.

- G. I. Fieldguide

Ward 5B

This morning, as I sit feeling like some insignificant morsel of humanity, whose thinking cap must have been drafted, I shall attempt to expose those who occupy this illustrious ward.

SPLASH - SPLASH: Commando Joe really enjoying his shower. We wonder if that round, pink soap has any significance....A Little White Lie: Ward 5B is the quietest place in the world to be while the sandman calmly treads the Milky Way....A Big Black Fib: "Tennessee" coming over to our dream castle possessing cigarettes, matches and not speaking a word....A Whopper: Our tray patients always being found in bed and being presented with the Blue Ribbon for following instructions by Doctor Yellin.

TID BITS TAKEN AT RANDOM: Ronny Lastufka dreaming his bed moves and appoints Bill Flynn as guardian of same....Ratti overcome because he doesn't win more stuff... Walter Champion contemplating a "big deal" with Jack Carpenter....Who swiped Armando's roll???....Red Portolos looking for a live one for "Commando Joe" to take to the cleaners. (Hearts)....Bob Sperry may stop reading "Coronet" for the duration, along with "Life" and "Pic"....Jesus Arellano serenading Harry Ashbrook.

HOROSCOPE: Let's peek into the future and see who's who, where and why on judgment day in 1960....George Bassil teaching Botany at U. C....Armando (Who's golden boy?) lecturing on "My operations" for Ringling Bros. and Barnum and Bailey....Art Baker designing for Esquire....Bill Flynn and Commando Joe debating in Congress - the topic "DeValera or Mussolini"....Harvey Hansen writing the last volume of a series entitled "How I Beat the Bug"....Ratti as a bookie for a North Beach baseball syndicate.

MORE HOROSCOPE: Joaquin Saenz designing belts for Campion and Carpenter, Ltd., McAllister Street merchants....Mike King, president of Jewish Welfare League and Hibernia Club....Tom Tirador the Dean of Stockton Barber College and secretary of the California Boxing Ass'n....Jim Montgomery writing for Hearst newspapers; his latest article is said to be "My Hero, Gen. Hugh Johnson"....Jim Roberts appointed U. S. Attorney General....Ronny still talking in his sleep (15-2, 15-4 and etc.)....George Miller trying to spend the five bucks he won....McFadden, mayor of San Francisco....Dick Rego dancing at San Francisco's El Patio, without his shoes....Richard Lee teaching Chiang Kai-Shek "Boogie Woogie"....Tom Barbarick, chairman Wrigley's Chewing Gum Co....Wong Fee still saying "O.K., O.K."....Adolph Thomas wishing he had sons like Ratti, Sperry and Flynn.

We have lost track of the other boys: they were always very reserved fellows, anyway. And now I leave you with this little ditty - should you attempt to locate yours truly, just phone Gantner and Maison in San Francisco, but don't be surprised when the phone is answered.

- John Brougham

Ward 6A That great migration last month increased its toll and affected our former (big ears) reporter Dick Rego. After discovering the improvement of his hopeful case, he repacked his personal belongings, which included his new white pants (no, not the same kind the orderlies use), filled his suit case (it could be an old saxophone case) and drove a wheel chair (without a permit or license) pursuing Fong Mee Sun. Because of the recent forty-mile-an-hour speed limit, he was faced with difficulty in overtaking Fong, who was just inching along. Later, we learned that Fong reached his destination a week ahead of Dick. Did Rego have a flat tire? We would like to take advantage of this opportunity to thank him for his ludicrous and most interesting write-ups of ward news. We miss his educationally beneficial conversations; and we hope he is enjoying his cure chasing at his new residence.

A young man, recently mistaken for a White Russian, who staggered aimlessly into our ward, was surprised to discover how good our food is. His appreciation of the food was confirmed by eating more than anyone else in the ward. His good appetite was rewarded with the accomplishment of an additional four pounds the first week. If he can keep this up steadily, he will have sufficient fat and will be ripened for a discharge soon. The patients call him "Goldbricker" because he has the remarkable ability of achieving his every intention. He collects firearms; and he is also wondering about the size of the tube that is used for gastric lavage.

We have a fast runner in this ward by the name of Rodney Hong. He is still able to run as swiftly as he ever could, and he will not hesitate to demonstrate his speed. Another track man, George "Shufflefoot" Ogi, who is in such a hurry, had a slight accident. It was later disclosed that his slippers were running away and George had to chase full speed after them. The trip-up resulted, probably, because his slippers stopped performing without a signal.

Steven Fong's proficiency in working with strings is developing very rapidly. His latest string belt is excellent. He also made a ring out of toothbrush handles. Said chap also whittles on prune and cherry pits....Louis Borini is composing more patriotic melodies. The only way to stop him is to get hold of his pencil....At the present time Leo Baldesseri is the heaviest man in the ward....Larry Bertolucci, a former truck driver, moved to the opposite corner to escape the cold wind....How does Clyde Talbot make a living on air?....And how does Maurice Johnson read in dark corner?....James Willis is quietly taking the cure....Welcome to Willy Cadigan - Poly High student who likes jig-saw puzzles.

- Roy Jair

ADVENTURES OF HERMAN & PETE

Dear Mr. Editor;

Thank you very much for sendin' me that last issue of The CLARION. Me an' Herman enjoyed it very much. Especially that illustration of our horse, Aphrodite, out in the back yard.

Well, I just wanted to write you that me an' Herman are still in the same apartment house an' Aphrodite is still in the back yard an' it looks like all three of us is here for the duration. Like I told you last month, we could not even give Aphrodite away to the Army, an' there is not another landlord in San Francisco who will let Aphrodite live in his back yard so it looks as though we are goin' to be here quite awhile. But that is O.K. with us as the landlord is a very nice guy an' says that Aphrodite is not to blame for the spot she is in as there are dumber animals in the world than horses. So you can see what a nice guy he is although I do not think he likes us quite so much since an unfortunate incident which occurred last month.

As usual, it was all - well, I'll let you guess whose fault it was. This night Herman is readin' the paper an', suddenly he says, "Pete, I have discovered how we can get rid of Aphrodite". I ask him how that is an' he says, "The paper says that next Sunday the government wants everyone to leave their junk an' tin cans, etc., out on the curb an' volunteers will collect it early in the morning. Why not put Aphrodite out on the curb as our contribution? At least they can make glue out of her". Well, I think this over and it sounds pretty reasonable. After all, the government needs glue the same as anybody else. So late Saturday night me an' Herman takes Aphrodite out an' hitches her to the corner lamp-post an' comes home.

About 6 a.m. there is an awful racket at the front door an' when I open it there is the landlord, lookin' rather haggard, an' right beside him is a very large an' unsociable lookin' cop. Right away the cop says, "What is the idea of hitchin' your horse to a lamp-post on my beat?" I thinks very fast an' says, "What makes you think it is my horse?" The cop gets very red indeed. "What makes me think it is your horse! Listen - every cop, every fireman, the Board of Supervisors, the 9th Corps Army Area and the 4th Interceptor Command has heard all about you an' that horse. Now come clean or else!" I see I am trapped so I tell him the whole story but he only gets madder. "What are you tryin' to give me?" he screams. "There ain't no Defense tin can drive today! There was one on Sunday, April 12th but today, you undersize sausage, is Sunday, May 10th!"

Everything goes black as an awful thought strikes me. "Herman," I says, "Where did you get that paper you read to me last night?" Herman says, "I got it out of the bureau drawer when I put in a clean one yesterday morning."

Well, the cop was all for havin' us hurled in the loony bin but the landlord calms him down - but even he ain't so chummy now. This business of elevatin' yourself is discouragin' at times.

Say hello to all the gang at Hassler an' tell 'em I hope to report better progress next month.

Yours sadly,
Patient Pete

P.S. Yesterday Herman asked me to stop at the corner an' bring him a newspaper. I hit him over the head with the coffee pot. Do you blame me?

"The shackles of habit are too small to be felt until they are too strong to be broken," someone spoke a long time ago. But our eyes bulged when we looked at the picture of Gulliver's giant. There he lay, flat on his back, a man-mountain - with the little figures swarming over him. He had just awakened and his eyes were bewildered and staring, as well they might be, for he couldn't move an inch.

"I attempted to get up but my arms and legs were so stiffly fixed that I could not move. I looked at my hands and feet and tried to wiggle them but they were as stiff as iron. I looked at the ground and saw that I was lying on a hard surface. I looked at the sky and saw that I was in the open air. I looked at the people and saw that they were all looking at me with expressions of surprise and wonder. I looked at the sign and saw that it said 'VACANCIES BROKEN ARMS APARTMENTS'."



SHACKLED LIVES

"The chains of habit are too small to be felt until they are too strong to be broken", someone spoke a long time ago. How our eyes bulged when we little folks first discovered that old book of "Gulliver's Travels" and studied the unforgettable picture of Gulliver bound! There he lay, flat on his back, a man-mountain - with the Lilliputians swarming over him. He had just awakened and his eyes were bewildered and furious, as well they might be, for he couldn't move an inch!

"I attempted to rise, but was not able to stir; for as I happened to lie on my back, I found my arms and legs were strongly fastened on each side to the ground, and my hair, which was long and thick, tied down in the same manner. I likewise felt several slender ligatures across my body, from my armpits to my thighs; I could only look upward...."

While he slept the tiny people had silently stolen upon him and bound him fast. Not with ordinary shackles for these they could not handle, but by countless filaments no thicker than cobwebs, which held him tighter than chains. He could have broken any one of them with a flick of his fingers, but against their united strength his huge body battled in vain.

Like Gulliver, we all start out in life feeling that nothing can hold us. We look contemptuously at the shackled lives around us - men and women who are held in the clutch of some vicious habit or bad mistake. Nothing like that, we vow, shall ever happen to us, but oftentimes before we have lived for many years those tiny cobwebs of greed, vanity, jealousy, and hatred too often begin to hang loosely about us. We brush them aside at first, but perhaps we do not always completely break them all. As those tiny clinging strands multiply we soon discover to our sorrow that they can bind a person faster than ship cables.

It is true that one kind of success can be had by men whose dominant characteristic is greed, but it is not the right kind of success. Real success brings a deep and genuine satisfaction. No greedy person is every fully satisfied with anything.

As for vanity, it is one of the chief causes of failure, for the vain man possesses a conceit that is empty or destitute of adequate cause or reason. A man who thinks he is good is naturally not going even to attempt to be better. While the habit of introspection is a bad one, a check-up now and then is as useful to an individual as is an inventory to a business firm. Beware if you find yourself mentally patting yourself on the back when you think you have done a particularly fine piece of work, or when you find that you are constantly making comparisons between yourself and others to the disadvantage of others. Some men become great, others just swell up. Life and time tell whether we are built up or only puffed up....

As for jealousy, not only does it embitter the lives of the young and romantic, but it warps and sours the life of every one who harbors it. It is time to start shaking free from those meshy cobwebs if you find yourself beginning secretly to hate people who are moving ahead more rapidly than you.

It would be worth while to consider not only the obvious shackles of big blunders, but more especially the cobweb filaments of thought and habit which bind men and women to obscurity and uselessness. We shall find ourselves bewildered, embittered, friendless and desperately unhappy if we awaken some day to find ourselves held fast by the things we thought didn't matter - the petty habits we were sure we "could break whenever we wished".

- SPUNK

- Penn. State Tuberculosis San.

'Round the Wards



Ward 19 Miss Elizabeth Mallick's proficiency in degassing has created much interest in the news - (nice to know just in case) - and interesting, too, the photogenic possibilities she possesses. Not only did she score 100 per cent in the tests, but the photos were most attractive. Ward 19 is most proud of its nurse, Miss Mallick.

Since the girls have discovered a quick and easy method of waving their own hair, there's been a great deal of glamourizing going on. Some of the rooms, at first glance, could be mistaken for beauty salons. The result is quite pleasing - saucy ringlets and curls fall precision-like into place. Those all prettied up are Adele Ashers, Carmen Bateman, Gertrude Otis, Dodie Wright, Dorothy Kennedy and Helen Read.

Ann Tasto, who is such a demure lass, has rare occasion to break into print. While this is altogether commendable, it would never do to let her go completely unnoticed. Rumors have been drifting up concerning her keen wit and sense of humor. We think she bears investigation. We hope you had a nice "day out", Ann.

Music Lovers Attention: We, in Ward 19, get the benefits of the classics thru the medium of Nancy Churchill. At any time of the day her liquid tones may be heard resounding thru the corridors. And she really does justice to the works of the most famous composers. Any time you feel in the need of a mental and spiritual "lift" come over and lend an ear.

There is an air of mystery surrounding Josephine Spillane; it pertains to her Sunday corsage. Now, no one seems to know just where they come from, and Jo is mum on the whole proceedings. Come on Jo - break down and divulge your one secret - and set our minds at ease.

Quickies: After solo-ing for a while, it's nice to see you in your old place again, Flo Davies....For many months Dorothy McCarthy has been dicker with the doctors, and has finally consented to go to surgery. For which we say, "Three Cheers"Rino Castro conversing in sign language and getting breathless. You figure it out, we can't....Treking down to the Farm, to further improve their health, went Sue Mock, Lye Shu Hew, Genette Standifer and Patsy Hurley. (Your ma misses you, Pat).

Frances Castro is recovering splendidly after her "thoro", and brought back a little "souvenir" of the same. But alas! it was mistaken for the aftermath of a "chop" dinner, and so out it went.

- Thelma Portolos

Ward 31

At the present rate of admissions and discharges we are of the opinion that The CLARION should start a "Lost and Found" column. As the first contributor to the new department we post the following losses - Rose Chan to Hassler. We hope you're getting along fine, Rose. Fumi Matsumoto, Bertha Doyle, Alice Fabella and Rose Dias - all have gone home and we wish them the best of luck. "Found" - Hannah Champion, Fern Chandler, Sid Fabian, Sylvia Crinos and Lois Granger. Hello to you all! (Pardon my southern accent).

Sue Coker and Edith Berger have left us for Ward 32 for awhile. We hear you're getting along very well and we hope you'll both be with us again, soon....Kit Austed is carrying on with the book reading while Sue is gone, and she still leads the ward in B.P.H. (Books per hour)....Linnea Dahl and Rose Mary Smith have joined our forces from Ward 32.

Kay White and Amelia Richards have deserted Room 10 & 11 in favor of the Solarium....There's a lull in our lives right now, but Marge Mahoney, Louise Resendez and Georgia Palesi are still sticking by their guns and crocheting one thing after another....Lil Adami has finally started on a table cloth, and when she will finish nobody knows....Our ward is always filled with flowers, but will we ever have enough vases?

Hello to Dr. MacKenzie. Hope he stays with us for awhile. We'd hate to lose his charming voice and ever-ready smile.

Dot "Lana" Phillips is continually talking in her sleep. The best ever was when her roommates woke up to find her rowing a boat. Dot is now a member of the "They'll Never Live It Down Club"....Little Norma Lee Murray has left her private room for Room 5 & 6. Now, everyone is happy!!

By the time of publication we will be minus three of our favorite patients, namely, Ila Heskett, Georgia Palesi and Dot Phillips. Hello, kids - hope we see you soon at Hassler.

- Marion MacDonald

Ward 32

Levon Flynn, with the help of another, who made it possible for our ward to be mentioned in The CLARION last month, has gone home. We'll miss you, Vonnice, and may you never return except to visit.

In the knitting and crocheting dept. we salute Barbara Lou for her knitting of beautiful sweaters. She is now on her third. By the time this is in print she'll most likely be modelling her fourth....The crazy shell stitch on Dotty Davidson's pot holders were finally accomplished after days and days of ripping....And back to knitting, we find that Nedra Cole is knitting a sweater for her mother. It looks to us like an attempt that will turn out O.K. Incidentally, Nedra just made her debut-a coming-out party to the Solarium.

Ethel Warren, with that pretty red hair, managed to arouse our ambitions to try out new hair styles - said coiffure is very becoming....Kay Douglas, a sweet young lady, always looks as though she stepped out of a band box....And also looking quite pert these days is Alyce Dawley - it's nice to see her up and about again....Edith Berger is doing marvelously since her thorocoplasty and is looking grand.

We find Olive Mc Cloud is still her sweet self....And Jane Addleman is quite the high-spirited girl. Speaking of high-spirited girls, Celia Gomez keeps us cheerful with her songs of operatic form. The Metropolitan has nothing on Celia.

In Room 9 can be heard the "Texan" drawl from Ruby Johnson, Leah Lenci's Italian quips, Shirley Chan munching on her Chinese candies; and last but not least, Lupe

PERSONALITY PRE-VIEW

WARD 32

RUBY JOHNSON'S
TEXAS DRAWL



WARD 28

GEORGE JANG



BUILDS BATTLESHIPS

WARD 31

"KIT" AUSTED



LEADS IN B.P.H.

WARD 26

FRANK BERG
PLAIN & FANCY
JEWELRY



-TERMS-

WARD 19

JOSEPHINE SPILLANE



SECRETS?

Tovar's Mexican melodies....There's an "Oh So Sweet" aroma of tropical spice cologne floating around. Can it belong to that little Hawaiian girl, Helene Rice?

Well, well, Helen Cleary is back in the groove. Keep up the good work, chum. By the way, Helen, who was that so and so who made you blush?

Congratulations on "First Ups": Alice Berkeley, Nora Bunner, Mary Smith and Margaret Jungles -- smooth sailing girls. Also congratulations to Sue Coker, who recently graduated from a private room to reside with Mary Smith.

Before we leave -- a word about Jane Addleman. She keeps the mailman so busy -- answering those 12 letters she received in one week. Perhaps we should also mention the 8 letters she gets weekly -- the 12 were extra.

-- Elvira Jordanoff

Ward 26 Yours truly was approached to write the ward news (any old port in a storm), so here goes. We find that Wing Hoo is up and around again, after another trip to surgery. This chap seems to be on his way to a complete and permanent recovery. Lots of luck, Wing!

Frank Berg is very busy in his corner work shop. At the moment he is making a brooch and bracelet set from a comb. We would call it a masterpiece. And incidentally, who is she, Frank?....On the porch we find Saburo Suenaga pounding away on a typewriter....Red Barrios is taking the rest cure -- not a bad idea. But we wonder, could it be the pneumo?

Max Gastesi is still smiling and looking healthier than ever. Keep it up, Max. Also smiling is "Cowboy" Garcia -- nothing ever seems to floor him.

A word to all our latest entries: We wish you lots of luck and that you all regain your health in short order.

-- Phillip Richards

Ward 28 We will begin this column with news of Mrs. Quintanna, who will be going on her vacation in a few days. She intends to spend her vacation on a "Dude Ranch" riding horses. We guess that's on account of a rubber shortage. What shall it be, Mrs. Quintanna, stick to horses or stick on them? Incidentally, Mrs. "Q" is Mrs. Johnson's assistant and a very capable one, too.

Mrs. Neiman, our four to midnight nurse, who has been on a vacation in Canada, is back with us again. According to reports she had a good time. Our own theory is that a person should have a few weeks to recuperate from a vacation. Do you agree Mrs. Neiman?....Pat Doherty, our practical nurse, has taken to "roller skating". She is saving her car because of the tire shortage. She cannot ride a bicycle -- hence the roller skates.

Jim Glynn is holding out on us. Jim came to work one morning with a beautiful "shiner". But he will not discuss it with anyone. Could it be that Jim spoke when he should have been listening. How's about it, Jim?

George Jang is spending his time building "battleships" -- he does an excellent job on these war machines, too....While we are on the subject of "ships", Jack Richards is also building battle wagons. Not to be outdone by these two, we find Tony Banioza is building a "liner"....Antonio "Tony" Gallegos is building bombers....And Albert "Mike" O'Brien Fong has quite a stamp collection.

Henry Gallo needs a derrick to move him. He wants to know if there is one laying around any of the wards....Herman "Pinky", who made a wish on a star, got his wish. Do they fit, "Pinky"?....Ray Winrott says, "Everytime I hear 'Deep In The Heart Of Texas', on the radio, I get homesick for the range". The reason: Ray has a cactus plant in a box which is about an inch in circumference. Said plant is about one half inch tall. Ray is still not astisfied, though; he now wants a horse, too.

Jerry Hensel went out on a pass recently and told us everything he had done. That is, he told all but what happened between the hours of three and five....Quite the opposite is Victor Brenta who says, "When I go out on a pass I'll black out everything".

Charlie is a lover of animals. He has a pig to which he feeds only nickels. He says, "The nickels will soon become 'War Bonds'". Nice going, Charlie.

Among our recent arrivals is one Charlie Kline, baseball fan extraordinary. And baseball season is here, too. Tough luck, Charlie, but we hope to have you out in time to enjoy some "Gomez" before long. Well, I guess I've said enough for this time.

- Jack Paulis

The employees of Hassler have been doing their bit towards winning the war by conducting a semi-monthly Bond Pool. Some of the winners of War Bonds have been Dr. Dan Yellin, Ernie Gilbertson, Grace Berkowitz, Peter Keenan and Mrs. Nellie Harrison.

the clarion

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The C L A R I O N welcomes all original literary and art contributions from patients, ex-patients and employees of the Hassler Health Home and the Tuberculosis Division of the San Francisco Hospital. Please address all communications to The C L A R I O N, Hassler Health Home, Redwood City, California,

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HELP YOURSELF!

The current issue of "Hygeia" carries an article by Miriam Zeller Gross. In the little biographical sketches of the contributors which follow the index it is stated that Mrs. Gross' first writing was done for the magazine of the tuberculosis sanatorium where she was a patient. She became interested in medical subjects while there and now is a frequent contributor to health magazines.

This is the first time that Mrs. Gross' story has come to our attention but many a similar tale is to be found in the local history of the san mag.

She began to write for the sanatorium magazine - and in beginning to write she not only did something for the magazine - she did something for herself - something which helped to fight the disease, something which gave her courage and when she left the hospital she was richer than when she entered. It was bread cast upon the waters and it returned again many fold.

The sanatorium magazine is an opportunity if you can see it. To participate in getting it out may give the experience which will be the difference between a job or no job. Not everyone can write - although there are more who can than have ever tried it, but writing isn't the only kind of work there is in getting out a magazine, as any board of editors can tell you. There is the gathering of news, the selling of subscriptions and advertising, make-up, proofreading, typing, cutting of stencils, to mention only a few of the necessary tasks. There is something for almost everyone who is physically ready for it.

What is the testimony of rehabilitation agents on the value of this work to the man or woman seeking an opportunity for training? Listen to one:

"This man worked on the hospital magazine for six months and stood up to it all right. From that I'm willing to take a chance that he's a good prospect for rehabilitation.

"Miss Blank did the typing for the sanatorium magazine; the other applicants for the position did not have any experience. So Miss Blank was hired.

"A firm needed someone to cut stencils for mimeograph work. Miss Brown had cut a hundred and fifty stencils for the sanatorium while there. She was the only typist with that much experience so her employer promoted her to the job".

The sanatorium magazine may be the chance you have been waiting for - to do something for the hospital - ask your editor what he needs most and try your hand at it. It won't be time wasted even if all you get out of it is a little fun and a pleasant association. It may be your chance to get at the head of the line waiting to apply for a job!

- National Tuberculosis Association

